



**PATENT**  
Attorney Docket No. INT03-002US(P1997US)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

Holcombe et al.

Art Unit: 2646

Application No. 10/783,777

Examiner: Briney III, Walter F.

Filed: February 20, 2004

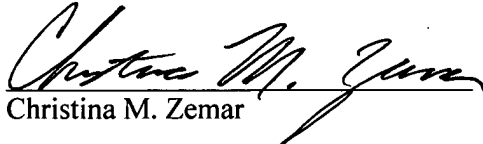
For: METHOD AND APPARATUS FOR  
ISOLATION IN A CALLER ID OR CALL  
MONITOR INTERFACE CIRCUIT

**CERTIFICATE OF MAILING UNDER 37 CFR 1.8**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Enclosed:

1. Transmittal Letter for Petition for extension of time in duplicate (2 pages).
2. Response To Office Action (4 pages).
3. Return Postcard
4. A check in the amount of \$120.00.

  
Christina M. Zemar

Date: February 17, 2006

In re Application of: Holcombe et al.  
 Application No. 10/783,777  
 Filed: February 20, 2004  
 For: METHOD AND APPARATUS FOR ISOLATION IN A CALLER ID OR CALL MONITOR INTERFACE CIRCUIT

Mail Stop Amendment  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450



Sir:

Transmitted herewith is a response to an office action in the subject application.

- ☐ Applicants claim small entity status of this application under 37 CFR 1.27.
- ☒ Petition For Extension Of Time  
☒ Applicants petition for a one-month extension of time under 37 CFR 1.136, the fee for which is \$120.00 (enclosed).  
☐ Applicants believe that no petition for an extension of time is necessary. However, to the extent that such petition is deemed necessary, Applicants hereby petition for a sufficient extension of time to render the present submission timely. Please charge Deposit Account No. 503594 for the appropriate petition fee.

☒ No additional claim fee is required.

☒ Other: self-addressed return postcard.

The claim fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADDIT CLAIM FEE	RATE	ADDIT CLAIM FEE
TOTAL	24	MINUS	24	=0	x \$25=	\$	x \$50=	\$
INDEPENDENT	3	MINUS	3	=0	x \$100=	\$	x \$200=	\$
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ \$180=	\$	+ \$360=	\$
					TOTAL	\$	TOTAL	\$

- ☐ Please charge my Deposit Account No. 503594 in the amount of \$ . A duplicate copy of this sheet is attached.
- ☒ A check in the amount of \$120 is attached.
- ☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 503594. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

FRANCISSSEN PATENT LAW, P.C.

By Vernon W. Francissen  
 Vernon W. Francissen, Reg. No. 41,762  
 Attorney for Applicant(s)

FRANCISSSEN PATENT LAW, P.C.  
 53 W. Jackson Blvd., Suite 656  
 Chicago, Illinois 60604  
 (312) 294-9980 (telephone)  
 (312) 275-8772 (facsimile)  
 Customer No.: 54384  
 02/22/2006 HVUONG1 00000005 10783777